

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | J. G. | 59 | 4/29/94 |
| O.I.P.E. CLASSIFIER | MW | 64820 | 5-3-99 |
| FORMALITY REVIEW | EW | | 5-17-99 |

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 - (Through numeral)... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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